UNITED STATI OMB APPROVAL SECURITIES AND EXCHANG 3235-0076 i Number: Washington, D.C. November 30, 2001 RECEIVED mated average burden 02039606 FORM D rs per response 16.00 NOTICE OF SALE OF SECURITIES SEC USE ONLY PURSUANT TO REGULATION D. Prefix Serial SECTION 4(6), AND/OR BNIFORM LIMITED OFFERING EXEMPTION DATE RECEIVED Name of Offering (check if this is an amendment and name has changed, and indicate change.) Offer and Sale of Membership Interests in MBC - Myrtle Beach, LLC, March 2002 Rule 504 Rule 505 Rule 506 Filing Under (Check box(es) that apply): Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer. Name of Issuer check if this is an amendment and name has changed, and indicate change.) MBC - Myrtle Beach, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 101 Waterville Road, Southport, CT 06490 (203) 319-0530 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business MBC - Myrtle Beach, LLC has been formed to develop and operate a restaurant Type of Business Organization corporation limited partnership, already formed other (please specify) Limited Liability Company PROCESSED business trust limited partnership, to be formed Month Year

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

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When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following:										
 Each promoter of the issuer, if the issuer has been organized within the past five years; 										
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities 										
of the issuer;										
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
Each general and managing partner of partnership issuers.										
Check Box(es) that Apply: X Promoter Beneficial Owner X Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Haskell, Macdonald T.										
Business or Residence Address (Number and Street, City, State, Zip Code) 101 Waterville Road, Southport, Connecticut 06490										
Check Box(es) that Apply: X Promoter Beneficial Owner X Executive Officer Director Managing Partner										
Full Name (Last name first, if individual)										
Murray, Andrew T.										
Business or Residence Address (Number and Street, City, State, Zip Code) 5 Kelbourne Avenue, Sleepy Hollow, New York 10591										
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Brown, Robert W.										
Business or Residence Address (Number and Street, City, State, Zip Code) 4465 Alta Tupelo Drive, Calabasas, California 91302										
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer Director Managing Partner										
Full Name (Last name first, if individual) CS Ventures, LLC										
Business or Residence Address (Number and Street, City, State, Zip Code) 101 Waterville Road, Southport, Connecticut 06490										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
(Use blank sheet, or copy and use additional copies of this sheet as necessary.)										

B. INFORMATION ABOUT OFFERING														
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering										Yes	No X			
2.	Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?										10,000			
۷.	What is the i	mmmam	mvestmen	i illat wili	oc accept	od mom a	ny marviac		***************************************		***************************************	••••••	Yes	No.
3.	B. Does the offering permit joint ownership of a single unit?													
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
	Full Name (Last name first, if individual)													
	W.B. McKee Securities, Inc.													
	Business or Residence Address (Number and Street, City, State, Zip Code)													
	7702 E. Doubletree Ranch Road, Suite 230, Scottsdale, Arizona 85258 Name of Associated Broker or Dealer													
	ontz, Jan Cha									_				
Stat	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
	(Check "All	States" or	r check ind	ividual St	ates)					***************************************			All S	tates
	[AL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC]	[FL]	[GA] [MN]	[HI] [MS]	[ID] [MO]	- · · · ·
	[MT]	[NE]	[NV]	[NH]	([tid])	[NM]	([YM])	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[sc]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]	
	l Name (Last r		t, if individ	ual)										
	insAm Securi siness or Resid		drage (Num	har and S	troot City	State 7	n Code)							
	0 S.R. 434, Si		-		=	State, Zi	p Code)							
Nar	ne of Associat						u ==							
	ry Smith tes in Which P	Person I is	tad Uac Sc	digited or	Intends to	Solicit D	urchasers							
Stat	(Check "All									•••••	•••••	••••••	All S	tates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[co]	[CT]	[DE]	[DC]	[FL]	[GA]	[ні]	[m]	
	[L]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[он] [wv]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full	Name (Last r					[01]	[* *]	[YA]	[WA]	[""]	Lui		[I.K.]	
Rue	iness or Resid	lence Add	tress (Num	her and S	treet City	State 7i	n Code)				-			
Dus	Business or Residence Address (Number and Street, City, State, Zip Code)													
Nan	Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check "All States" or check individual States) All States														
	[AL]	[AK]	[AZ]	[AR]	[CA]	[co]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[m]	
	[L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	- [он] [wv]	[OK] [WI]	[OR] [WY]	[PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$	-	0 \$		0.00
	Equity			0 \$	_	0.00
	Common Preferred				_	
	Convertible Securities (including warrants)	¢	0.00	0 \$		0.00
	Partnership Interests.			<u>9 </u>	-	0.00
	Other (Specify LLC Membership Interests)	_			_	2,000,000.00
	Total	\$ - \$	2,000,000.0	<u> </u>	_	2,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	_	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	-	2,000,000.00
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors			Aggregate Dollar Amount of Purchases
	Accredited Investors	_	15	\$	_	2,000,000.00
	Non-accredited Investors	_	0	_ \$	_	0.00
	Total (for filings under Rule 504 only)	_		\$	_	
	Answer also in Appendix, Column 4, if filing under ULOE					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. N/A					
	Type of offering		Type of Security			Dollar Amount Sold
	Rule 505			\$		5014
	Regulation A	_			_	
	Rule 504				_	
	Total			_ \$		
4.a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$	0.00
	Printing and Engraving Costs				\$	0.00
	Legal Fees.			X	\$	100,000.00
	Accounting Fees				\$	0.00
	Engineering Fees				\$	0.00
	Sales Commissions (specify finders' fees separately)			X	\$	82,500.00
	Other Expenses (identify) State Blue Sky Filing Fees			X	\$	2,560.00
				=	e.	
	Total	•••••		X	\$	185,060.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	•						
•	C. OFFERI	NG PRICE, NUMBER OF INVESTORS, EXPENSE	ES AND I	USE OF PROCEEDS	3		
b.	Enter the difference between the a Question 1 and total expenses furnis is the "adjusted gross proceeds to the	\$	· _	1,814,940.00			
5.	used for each of the purposes shown estimate and check the box to the le	justed gross proceeds to the issuer used or propose. If the amount for any purpose is not known, furth of the estimate. The total of the payments list to the issuer set forth in response to Part C - Ques	rnish an ed must				
				Payments To Others			
	Salaries and fees		\$	0.00		\$	0.00
	Purchase of real estate		\$	0.00		\$	0.00
	Purchase, rental or leasing and	installation of machinery and equipment	\$	0.00		\$	0.00
	Construction or leasing of plant	t buildings and facilities	-	0.00		\$	0.00
	Acquisition of other businesses this offering that may be used in another issuer pursuant to a men		\$	0.00			
another issuer pursuant to a merger) \$ Repayment of indebtedness \$ \$						\$	0.00
	Working capital	0.00	\mathbf{x}	\$	1,814,940.00		
	Other (specify)	L	\$			•	1,011,0100
			\$	0.00		\$	0.00
	Column Totals		\$	0.00	X	\$	1,814,940.00
	Total Payments Listed (column	X \$	1,814,94	10.00	<u>) </u>		
		D. FEDERAL SIGNATURE					
sig	nature constitutes an undertaking by the	be signed by the undersigned duly authorized per he issuer to furnish to the U.S. Securities and Ex- transport non-accredited investor pursuant to paragraph (b	kchange	Commission, upon			_
Issu	ner (Print or Type)	Date					
CS	Ventures, LLC	Macdonald Sa	Hell	ν 	May 1	0, 2	002
Naı	ne of Signer (Print or Type)	Title of Signer (Print or Type)					
Ma	cdonald T. Haskell	Manager					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)